FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT! **CORPORATION** ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997

DOCUMENT # S06132

(2)

SMILIN' JACK ENTERPRISES, INC.

Principal Place of Business Mailing Address **480 WALKER STREET 460 WALKER STREET** HOLLY HILL FL 32117-2671 HOLLY HILL FL 32117-2688

FILED May 23 1997 8:00am Secretary of State



									
}						3. Date Incorporated or Qualified	3a. Date of L	•	
Dringing F	Non- of Discharge	Lat. Alexa Add				10/16/1990	03/04/19)4/1996	
└	Place of Business	2a. Mailing Address				4. FEI Number	<u> </u>	Applied For	
21 Suito Ant	# oto	26 Cuita Ant f				59-3051364		Not Applicable	
Suite, Apt. #, etc.		Suite Apt. #, etc.				5. Certificate of Status Desired		.75 Additional ee Required	
City & Stal	te	City & State				6. Election Campaign Financing	\$5	.00 May Be	
23		28				Trust Fund Contribution	☐ Ac	dded to Fees	
Zip	Country	Zφ	C	Country	•	8. This corporation has liability for	intangible tax un	der s. 199.032,	
24	25	29	30			Florida Statutes] Yes 🔲 No		
	9. Name and Address of Currer	nt Registered Agent				10. Name and Address of New Re	gistered Agent		
JOL	IES, WILLIAM H., JR.			81	Name				
460 WALKER STREET				22	82 Street Address (P.O. Box Number is Not Acceptable)				
	LY HILL FL 32017		62 Street A		address (r.o. box number is not acceptable)				
	CLI THOCT C DEDTI		83		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				
				84	City	THE PARTY OF PARTY AND A SECOND SECOND	FL 85	Zip Code	
11. Pursuant	to the provisions of Sections 607.050	02 and 607.1508, Florid	da Statules, the	above	named co	proporation submits this statement for the p	urpose of chance	ging its registered	
office or i agent. I a	registered agent, or both, in the State am f <mark>amiliar with, and accept the oblig</mark>	rof Florida. Such chan ations of, Section 607.	ige was authori. 0505, Florida S	zed by talutes	the corpor 3.	ration's board of directors. I hereby accep	ot the appointme	nt as registered	
SIGNATURE	Signature, typed or printed name of registered age				,				
12.	OFFICERS AN		·	nied Age	nt signature rec	quired when reinsta; ng)	DATE	07000 4140	
TITLE	T -	DE DIRECTORS		3. 1]HLF	<u>-</u>	ADDITIONS/CHANGES TO OFFIC	Chi		
	D IONEO MILITARA I IO						L) VIII	ange Auuilloo	
NAME	JONES, WILLIAM J. JR.			2 NAME					
STREET ADORESS	460 WALKER STREET		1.3	3 STREET	ADDRESS				
CITY-ST-ZIP	HOLLY HILL FL			1.4 CHY-S1-7IP					
TITLE		□ DE	1 ETE 2.1	TITLE			∐ Cha	ange 🔲 Addition	
NAME			2.5	2 NAME					
STREET ADDRESS			2.3	3 STREET	ADDRESS				
CITY-ST-ZIP			2.	4 CITY - S	ST - ZIP				
TITLE		□ Dt	1616 31	1 TAILE			☐ Cha	ange Addition	
NAME			3.2	2 NAME					
STREET ADDRESS			3.3	a STREET	ADDRESS				
CITY-ST-ZIP				4 CITY-S					
TITLE		. DE		i Tille	11: 211		Chi	ange Addition	
NAME				2 NAME				,	
STREET ADDRESS					4000000		_	ν ^{ω 1}	
					ADDRESS	•	٠,(\		
CITY-ST-ZIP		DE DE		CITY-S	- ZIP		V 1-100	0000	
		L.J. Dt		I TITLE		N WIII	✓ ` □ Chi	ange 🔲 Addition	
NAME			1	2 NAME		Da V.	}		
STREET ADDRESS			5.3	3 STREET	ADDRESS	• ()	•		
CITY-ST-ZIP				CITY - S	r-7IP	, h			
TITLE		□ DE	LETE 61	THLE		70000220 -06/04/970100	UC: 4	ange 🔲 Addition	
NAME			6.2	NAMÉ		-06/04/970100	าวกจั4		
STREET ADDRESS			6.3	STREE1	ADDRESS	***558.08	,_ 001		
CITY-ST-ZIP			6.4	F C(1) Y - S1	r - 21P	<u> かかかりごじょしひ</u>			
	ay certify that the information equality	duvith this tiling does		20.000	motion alab	ad in Castion 110 07/9/(). Elected Statutes		The state of	

Information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

1,9/95 (Gal)50-114